

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF JANET LEIGH FRANKLIN		COURT CASE NUMBER 04-1513-GMS
DEFENDANT MBNA AMERICA Corp.		TYPE OF PROCESS Disability Termination Disc.
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN MBNA AMERICA Corp.	
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1100 N. King St. Wilmington, De. 19801	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		
JANET LEIGH FRANKLIN 827 Sabina Cir. Bear, De. 19701		Number of process to be served with this Form - 285 1
		Number of parties to be served in this case 1
		Check for service on U.S.A. 1

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Noted: Filed out 285-Form 1/12/05, got lost in office. (302-453-9930) operator
 MBNA America Corp.
 1100 N. King St
 Wilmington, De. 19801

Signature of Attorney or other Originator requesting service on behalf of:

Janet L. Franklin☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

302-832-2656

DATE

5/2/05**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. 15	District to Serve No. 15	Signature of Authorized USMS Deputy or Clerk BF	Date 5-16-05
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Andrea Stevenson, Sr Legal Asst.

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

5/17/05

Time

245

am

Signature of U.S. Marshal or Deputy

BT Mahay

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: